

What's Needed for Health Care Reform: Personalized Care That Puts You and Your Doctor in Charge

The following is an open letter to the American people from 81 leaders participating in the Health Policy Consensus Group. The full list of signatories follows the letter.

The nation faces a clear choice between two paths for America's health care future:

- One path is largely controlled by the government, where you get few choices and no options to escape.
- The other is controlled by you and doctors, leading to more choices, lower costs, and improved quality and access.

The first path builds on failure. Approaches like a public option—"Medicare for All" on the installment plan—double down on Obamacare's failures, especially its soaring costs and tightening restrictions on access to the doctors and hospitals you want and need.

Make no mistake: No matter how their ideas are packaged, the left's ultimate goal is Medicare for All—legislation sponsored by a majority of House Democrats that is full of empty promises and that would outlaw your existing coverage and put you on a government-run plan.

The second path reflects what Americans want—an innovative patient-focused approach that gives you more control and better choices at lower costs.

It's a path that frees patients and doctors to make care decisions and empowers innovators to produce better solutions at lower prices. It makes insurance and care more affordable, while better protecting those with preexisting conditions and chronic health challenges.

Americans know we need real change. You want to be in charge of your health care without asking

Washington politicians or health insurance bureaucrats for permission.

Here's how the Health Care Choices 2020 proposal makes you better off in at least 10 ways. The proposal:

- 1. Empowers you to keep your health coverage and doctors when you change or lose your job.** The COVID-19 pandemic has exposed the need for people to have secure, portable health coverage. Congress should codify and improve the administration's Health Reimbursement Arrangement rule that allows employers to offer and employees to use tax-free dollars to buy insurance they can keep if they lose or change jobs. Our plan also would let low-income patients use the value of their existing government coverage to enroll in better, private health plans, including employer-sponsored coverage.
- 2. Saves you money on health care and drugs by making the prices of health care transparent.** Medical care is one of the few services where you don't know the price until weeks or months after you receive care. Congress should codify the administration's transparency rules so you can compare prices and obtain the best value—and share in the savings.
- 3. Eliminates your risk of surprise medical bills through transparency and truth in advertising.** Too many patients face high medical bills they did not expect and did not agree to pay. Transparent prices and truth in advertising are the first steps to resolving that problem.
- 4. Benefits you financially when you choose lower-cost, high-quality care.** Prices for the same medical services can vary by thousands of dollars. You should be able to benefit if you choose a lower-cost alternative that better suits your

needs. Congress should permanently eliminate regulatory barriers that keep you from being able to shop for value, and it should allow you to put any savings you receive into a health savings account.

5. Gives you better options, lower premiums, and better access to doctors if you get sick, have a preexisting condition, and need financial help.

Today, Congress sends money to insurance companies and imposes burdensome mandates that drive up the cost of coverage for everyone. Instead, Congress should give regulatory relief to states so they can reform their insurance markets. And it should convert the subsidies that currently go to Medicaid expansion and health insurance tax credits into formula grants to the states to support coverage for lower-income and vulnerable patients. The grants would be distributed through the Children's Health Insurance Program, with built-in life protections so taxpayer money can't be used to fund abortions.

6. Gives you access to specialized plans and care if you have a chronic illness.

Health insurance plans can perform better when they don't try to be all things to all people. Instead, we should encourage plans that include centers of excellence that cater to patients with specific medical problems, such as heart disease or diabetes. Congress should clear away barriers that block this option.

7. Gives you more options to get insurance and care tailored to your needs and those of your family.

Government rules that dictate every detail of insurance policies keep consumers from selecting plans that make the most sense. Congress should codify the administration's rules on Association Health Plans and short-term policies, expanding the range of options for consumers to get coverage that meets their needs, including the ability to choose a direct primary care doctor or join a health care sharing ministry.

8. Makes it easier for you to manage your own health care dollars.

Millions of Americans with high health costs are not eligible to contribute to health savings accounts, includ-

ing seniors on Medicare. Congress should create broad, flexible access to these accounts so anyone can use them in conjunction with more versatile plans, including those that provide high-quality care for chronic illness.

9. Makes telehealth permanent so you can talk "virtually" with medical care providers.

Telehealth allows patients to have access to their doctors without long waits, trips to emergency rooms, and risking exposure to other sick patients in a doctor's office. Regulators cleared away barriers to telehealth during the pandemic, and the number of virtual doctors' visits has soared in just a few months. Congress and the states should make this temporary relief permanent and relax other barriers to unleash the full potential of new care delivery options.

10. Offers more choices, lower prices, and better quality by removing barriers to innovation and competition.

Policymakers at the federal and state levels have imposed burdensome mandates and regulations that discourage competition, interfere with patients' access to the care of their choosing, and reward big businesses and special interests at the expense of patients. Examples include laws such as certificate-of-need regulations that create barriers to entry and rules that prevent providers from practicing at the top of their licenses.

Congress and the states should lift those barriers to foster innovation and provide more and better options for consumers to get lower prices and better quality through competition.

The debate today is between those who want to exert even more government control over the health care sector and those, like us, who favor giving patients more choice and control, and who support allowing the creativity we have seen in the COVID-19 crisis to flourish.

We want a system that encourages innovation and competition to provide consumers the best care at the lowest cost. We welcome the opportunity to work with policymakers to shape the better, brighter health care future we believe can be ahead.

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